

UNITED STATES PATENT & TRADEMARK OFFICE
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REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____		2 Serial/Patent # <u>10/317839</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input checked="" type="checkbox"/> Filing			\$ <u>100</u>
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
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		7 TOTAL AMOUNT OF REFUND	\$ <u>100</u>
10 REASON:		8 TO BE REFUNDED BY:	
<input checked="" type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Treasury Check	
<input type="checkbox"/> Duplicate Payment		<input checked="" type="checkbox"/> Credit Deposit A/C #: <u>02-2448</u>	
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Tamala Holland</u>		TITLE: <u>Paralegal</u>	
SIGNATURE: <u>T. Holland</u>		PHONE: <u>703-308-9140 X209</u>	
OFFICE: <u>PCT</u>			
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

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